

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000052588

FILED
May 25, 2007
Secretary of State**Entity Name:** ZARBAL CORP.**Current Principal Place of Business:**4232 MAHOGANY RIDGE DR.
WESTON, FL 33331**New Principal Place of Business:****Current Mailing Address:**4232 MAHOGANY RIDGE DR.
WESTON, FL 33331**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZARZALEJO, LUIS E
4232 MAHOGANY RIDGE DR
WESTON, FL 33331 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:_____
Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** DP () Delete
Name: ZARZALEJO, LUIS E
Address: 4232 MAHOGANY RIDGE DR
City-St-Zip: WESTON, FL 33331**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: BALBI, HILDA M
Address: 4232 MAHOGANY RIDGE DR
City-St-Zip: WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HILDA M BALBI

VP

05/25/2007

Electronic Signature of Signing Officer or Director_____
Date